

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002569

FILED
May 16, 2007
Secretary of State

Entity Name: DURANT HIGH SCHOOL ATHLETIC BOOSTERS CLUB, INC.

Current Principal Place of Business:

8383 TURKEY CREEK RD
PLANT CITY, FL 33567

New Principal Place of Business:

Current Mailing Address:

8383 TURKEY CREEK RD
PLANT CITY, FL 33567

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GREEN, CARL
DURANT HIGH SCHOOL
8383 TURKEY CREEK RD.
PLANT CITY, FL 33567 US

Name and Address of New Registered Agent:

RABURN, CHRISTINA
DURANT HIGH SCHOOL
8383 TURKEY CREEK RD.
PLANT CITY, FL 33567 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CHRISTINA RABURN

05/16/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CARTER, MATT
Address: 2103 COLEWOOD LN
City-St-Zip: DOVER, FL 33527

Title: TD () Delete
Name: NICHOLSON, DEBRA
Address: 3026 CUNARD DR
City-St-Zip: VALRICO, FL 33594

Title: S () Delete
Name: CARTER, KAREN
Address: 2103 COLEWOOD LN
City-St-Zip: DOVER, FL 33527

Title: VD () Delete
Name: ROSS, JAYNE
Address: 2126 JAUDON RD
City-St-Zip: DOVER, FL 33527

Title: VD () Delete
Name: CANNON, MARY
Address: 8383 TURKEY CREEK RD
City-St-Zip: PLANT CITY, FL 33567

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBRA NICHOLSON

TD

05/16/2007

Electronic Signature of Signing Officer or Director

Date